Mississippi Insurance Department P.O. Box 79 Jackson, Mississippi 39205-0079



Reports must be filed within 30 days of the end of each quarter in the year.

REPORTING FORM FOR FILING TAXES FOR ALL RISK RETENTION GROUPS AS REQUIRED UNDER SECTION:

§ 83-55-7. (C) Taxation.

Name of Licensed Company

(1) Each risk retention group shall be liable for the payment of premium taxes and taxes on premiums of direct business for risks resident or located within this state, and shall report to the Commissioner the net premiums written for risks resident or located within this state. Such risk retention group shall be subject to taxation, and any applicable fines and penalties related thereto, on the same basis as a foreign admitted insurer.

hereby certify that the follo							
ousiness placed and/or renev							
Sworn to and subscribed							
	Signature			Name of Risk Retention Group			
this	day of		, 20)	Address		
Noton, Bublic							
Notary Public				Risk Re	tention Group Contac	et Person	
					Telephone #		
(NOTE:	THIS REPORT WIL	L NOT BE ACCE	PTED IF NOT SIGI	NED AND NOTA	RIZED)		
		POLICY	POLICY DATES TOTA				
INSURED	POLICY NO.		FROM TO:		AND POLICY FEES:		
					1		
OUD TOTAL DEFINITION AND T	011075555						
SUB-TOTAL PREMIUMS AND P							
TOTAL PREMIUMS AND POLIC						_	
TOTAL TAX 3% Tax on Licensed	Companies;			\$		_	

The side (Page2) may be used for listing additional taxable business and premiums when Page 1 is not sufficient, and the total premium shown on this page must be carried to Page 1 where indicated.

INSURED	POLICY NO.	POLICY DATES FROM TO:		TOTAL PREMIUM AND POLICY FEES:	

TOTAL Taxable Premiums and Policy Fees.....\$

(This above total shall be carried to the appropriate line on Page 1)